

COMBINED DECLARATION AND POWER OF ATTORNEY

Attorney Docket No.

199at09.us (8602*36)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled "Spliceosome Protein and its Use" the specification of which

(check one) ☐ is attached hereto.

☒ was filed on November 29, 2001 as

Application Serial No. 09/980,372 and

was amended on November 29, 2001
(if applicable)

was amended through _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or (f) or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate, or §365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's or plant breeder's rights certificate, or PCT International application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claimed

<u>199 25 668.3</u>	<u>Germany</u>	<u>04 June 1999</u>	<input checked="" type="checkbox"/> <input type="checkbox"/>
(Number)	(Country)	(Day/Month/Year Filed)	Yes No
<u>PCT/EP00/03949</u>	<u>International</u>	<u>03 May 2000</u>	<input checked="" type="checkbox"/> <input type="checkbox"/>
(Number)	(Country)	(Day/Month/Year Filed)	Yes No
_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>
(Number)	(Country)	(Day/Month/Year Filed)	Yes No

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)
_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)

I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below.

_____	_____
(Application No.)	(Filing Date)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) associated with **CUSTOMER NUMBER 23416**, all of **CONNOLLY BOVE LODGE & HUTZ LLP**, as attorneys with full power of substitution to prosecute this application and conduct all business in the Patent and Trademark Office connected therewith.

Send Correspondence To: Connolly Bove Lodge & Hutz LLP P.O. Box 2207 Wilmington, Delaware 19899-2207		Direct Telephone Calls To: (302) 658-9141	
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FULL NAME OF SOLE OR FIRST INVENTOR Bettina Bauer	INVENTOR'S SIGNATURE <i>Bettina Bauer</i>	DATE 13.02.2002
RESIDENCE Johannesallee 15, 65929 Frankfurt, Germany		CITIZENSHIP Germany
POST OFFICE ADDRESS Aventis Research & Technologies GmbH & Co KG, Patent-und Lizenzabteilung, Industriepark Höchst, Gebäude D 706, 65926 Frankfurt, Germany		
FULL NAME OF SECOND JOINT INVENTOR IF ANY Reinhard Lührmann	INVENTOR'S SIGNATURE <i>Reinhard Lührmann</i>	DATE 13.02.2002
RESIDENCE Ewiges Tal 16b, 35041 Marburg, Germany		CITIZENSHIP Germany
POST OFFICE ADDRESS Aventis Research & Technologies GmbH & Co KG, Patent-und Lizenzabteilung, Industriepark Höchst, Gebäude D 706, 65926 Frankfurt, Germany		
FULL NAME OF THIRD JOINT INVENTOR IF ANY Cindy Will	INVENTOR'S SIGNATURE <i>Cindy Will</i>	DATE 13.02.2002
RESIDENCE Nikolausberger Weg 72, 37073 Göttingen, Germany		CITIZENSHIP U.S.A.
POST OFFICE ADDRESS Aventis Research & Technologies GmbH & Co KG, Patent-und Lizenzabteilung, Industriepark Höchst, Gebäude D 706, 65926 Frankfurt, Germany		
FULL NAME OF FOURTH JOINT INVENTOR IF ANY	INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS		
FULL NAME OF FIFTH JOINT INVENTOR IF ANY	INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS		
FULL NAME OF SIXTH JOINT INVENTOR IF ANY	INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS		
FULL NAME OF SEVENTH JOINT INVENTOR IF ANY	INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS		
FULL NAME OF EIGHTH JOINT INVENTOR IF ANY	INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS		

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(Number)	(Country)	(Day/Month/Year Filed)	Yes No
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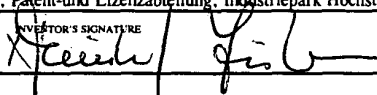
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FULL NAME OF SOLE OR FIRST INVENTOR	INVENTOR'S SIGNATURE	DATE
Bettina Bauer		
RESIDENCE		CITIZENSHIP
Johannesallee 15, 65929 Frankfurt, Germany		Germany
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FULL NAME OF SECOND JOINT INVENTOR IF ANY	INVENTOR'S SIGNATURE	DATE
Reinhard Lührmann		23/2/02
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Aventis Research & Technologies GmbH & Co KG, Patent-und Lizenzabteilung, Industriepark Höchst, Gebäude D 706, 65926 Frankfurt, Germany		
FULL NAME OF THIRD JOINT INVENTOR IF ANY	INVENTOR'S SIGNATURE	DATE
Cindy Will		
RESIDENCE		CITIZENSHIP
Nikolausberger Weg 72, 37073 Göttingen, Germany		U.S.A.
POST OFFICE ADDRESS		
Aventis Research & Technologies GmbH & Co KG, Patent-und Lizenzabteilung, Industriepark Höchst, Gebäude D 706, 65926 Frankfurt, Germany		
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<small>FULL NAME OF SECOND JOINT INVENTOR IF ANY</small> Reinhard Lührmann		<small>INVENTOR'S SIGNATURE</small> 	
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<small>FULL NAME OF THIRD JOINT INVENTOR IF ANY</small> Cindy Will		<small>INVENTOR'S SIGNATURE</small> <i>X Cindy Will</i>	
<small>RESIDENCE</small> Nikolausberger Weg 72, 37073 Göttingen, Germany		<small>CITIZENSHIP</small> U.S.A.	
<small>POST OFFICE ADDRESS</small> Aventis Research & Technologies GmbH & Co KG, Patent- und Lizenzabteilung, Industriepark Höchst, Gebäude D 706, 65926 Frankfurt, Germany			
<small>FULL NAME OF FOURTH JOINT INVENTOR IF ANY</small> 		<small>INVENTOR'S SIGNATURE</small> 	
<small>RESIDENCE</small> 		<small>CITIZENSHIP</small> 	
<small>POST OFFICE ADDRESS</small> 			
<small>FULL NAME OF FIFTH JOINT INVENTOR IF ANY</small> 		<small>INVENTOR'S SIGNATURE</small> 	
<small>RESIDENCE</small> 		<small>CITIZENSHIP</small> 	
<small>POST OFFICE ADDRESS</small> 			
<small>FULL NAME OF SIXTH JOINT INVENTOR IF ANY</small> 		<small>INVENTOR'S SIGNATURE</small> 	
<small>RESIDENCE</small> 		<small>CITIZENSHIP</small> 	
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<small>FULL NAME OF SEVENTH JOINT INVENTOR IF ANY</small> 		<small>INVENTOR'S SIGNATURE</small> 	
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